



Ghanshyam Nursery School

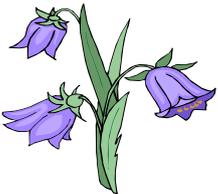
'laying the foundations for life'

We strive to provide the highest quality childcare facilities and personnel for the social, personal, cultural and religious advancement of the child

November Newsletter

What we will be learning

Bluebell Room



This month we will be celebrating Diwali. We will be singing Diwali songs and doing various creative activities. We will also be introducing simple shapes such as the circle, triangle, square and rectangle.

Parental involvement: Talk to your children about Diwali and shapes in the environment.

EYFS Link - Physical development, Communication & Language, Expressive, Arts and Design, Understanding the World



Tulip Room

We will be looking at different festivals over the next few weeks, such as Guy Fawkes and Diwali for November and other festivals to follow. We will be building up on language & vocabulary. We will

also be learning Diwali songs.

Parental involvement: Please take pictures of your children in traditional clothes with family and send to the Nursery.

EYFS Link : Understanding the World, Communication & Language



Sunflower Room 1

We will be talking about the four seasons, focusing on Autumn and introducing winter, children will be talking about what they feel and see during Autumn. We will be going for walks and going to the park to collect twigs and acorns. Parents can also do these activities at home with their children.

EYFS Link: Understanding the world, Expressive, Arts & Design



Important dates...

No uniform 5th, 6th & 7th November (Dress up in traditional clothes)

7th November: Diwali show— 2pm (Parents in traditional as well please)

8th November: Closed for Ankoot (Hindu New Year)

9th November: Nursery closed for Inset day

16th November: Children in Need—Pyjama day (pay £2 for charity)

30th November: No uniform day

Happy Birthday

Roshan—3

Krishan—4

Aanav—4

Nayan—4

Darsh—4

Rian—4



Inset days 2018

Thursday 8th

November (Ankoot)

Friday 9th November

Monday 24th December



Sunflower Room 2



We will be learning about Diwali. We will be making Diwali cards and Rangoli patterns and also preparing the children for the Diwali show. We will also be learning phonics and learning to write. We will also be continuing with our numbers beyond 10.

Parental involvement: Please encourage your children to do cooking activities during the Diwali period and share your experiences by sending your pictures to enquiries.gns@sksst.org, so we can talk about it during circle time.

EYFS Link: Understanding the world, Expressive, Arts & design, Mathematics

Parking in the Disabled Bay

Parents are reminded not to park in the disabled bay when dropping off children.



Thank you to all the parents and staff who made and bought cakes for the Macmillan coffee morning.

We raised £469. Thank you for your generosity. A special thank you to Neesha (Ruhi's mum) and Jasvanti (Roshan's mum) for helping out on the day. Your help was invaluable.

Thank You

Emergency Contacts

Parents are reminded to ensure that correct contact numbers and names for all adults who can pick up your child in an emergency. We are unable to send the children home with anyone that you have not pre-notified us of. This is important for the welfare of your child.

Policy of the Month

Managing Children who are sick

We will be going through this in our next staff meeting also.

EYFS

We will be talking about the benefits of physical play.

We will be discussing this in our next staff meeting.

Self Registration

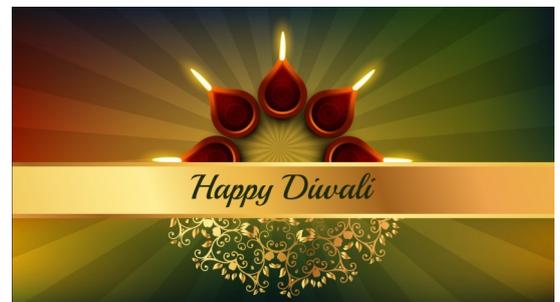
The children enjoy finding their flowers in the morning. Please can parents do this with the children when they arrive at the nursery as well.

Nursery Contact

Please can all parents ensure they have the nursery mobile number stored in their phone

The number is 07722574698 or 020 8909 9389 opt 1

All emails to the nursery should go to enquiries.gns@sksst.org



6.2 Managing children who are sick, infectious, or with allergies

Policy statement

We aim to provide care for healthy children through preventing cross infection of viruses and bacterial infections and promote health through identifying allergies and preventing contact with the allergenic trigger.

Procedures for children who are sick or infectious

If children appear unwell during the day – for example, if they have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – our manager or key person will call the parents and ask them to collect the child, or to send a known carer to collect the child on their behalf.

If a child has a temperature, they are kept cool, by removing top clothing and sponging their heads with cool water, but kept away from draughts.

The child's temperature is taken using a forehead thermometer strip, kept in the first aid box.

If the child's temperature does not go down and is worryingly high, then we may give them Calpol or another similar analgesic, after first obtaining verbal consent from the parent where possible. This is to reduce the risk of febrile convulsions, particularly for babies. Parents sign the medication record when they collect their child.

In extreme cases of emergency, an ambulance is called and the parent informed.

Parents are asked to take their child to the doctor before returning them to the setting; we can refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease.

Where children have been prescribed antibiotics for an infectious illness or complaint, we ask parents to keep them at home for 3 days before returning to the setting.

After diarrhoea, we ask parents keep children home for 48 hours following the last episode.

Some activities, such as sand and water play, and self-serve snacks where there is a risk of cross-contamination may be suspended for the duration of any outbreak.

We have a list of excludable diseases and current exclusion times. The full list is obtainable from

www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1194947358374 and includes common childhood illnesses such as measles.

Reporting of 'notifiable diseases'

If a child or adult is diagnosed as suffering from a notifiable disease under the Health Protection (Notification) Regulations 2010, the GP will report this to Public Health England.

When we become aware, or are formally informed of the notifiable disease, [our manager informs/I inform] Ofsted and contacts Public Health England, and act[s] on any advice given.

HIV/AIDS/Hepatitis procedure

HIV virus, like other viruses such as Hepatitis A, B and C, are spread through body fluids. Hygiene precautions for dealing with body fluids are the same for all children and adults. We:

Wear single-use vinyl gloves and aprons when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.

Use protective rubber gloves for cleaning/sluicing clothing after changing.

Rinse soiled clothing and either bag it for parents to collect or launder it in the setting.

Clear spills of blood, urine, faeces or vomit using mild disinfectant solution and mops; any cloths used are disposed of with the clinical waste.

Clean any tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit using a disinfectant.

Ensure that children do not share tooth brushes, which are also soaked weekly in sterilising solution.

Nits and head lice

Nits and head lice are not an excludable condition; although in exceptional cases we may ask a parent to keep the child away until the infestation has cleared.

On identifying cases of head lice, we inform all parents ask them to treat their child and all the family if they are found to have head lice.

Procedures for children with allergies

When children start at the setting [we/I] ask their parents if their child suffers from any known allergies. This is recorded on the Registration Form.

If a child has an allergy, we complete a risk assessment form to detail the following:

The allergen (i.e. the substance, material or living creature the child is allergic to such as nuts, eggs, bee stings, cats etc).

The nature of the allergic reactions (e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc).

What to do in case of allergic reactions, any medication used and how it is to be used (e.g. Epipen).

Control measures - such as how the child can be prevented from contact with the allergen.

Review measures.

This risk assessment form is kept in the child's personal file and a copy is displayed where [our staff/I] can see it.

Generally, no nuts or nut products are used within the setting.

Parents are made aware so that no nut or nut products are accidentally brought in, for example to a party.

Insurance requirements for children with allergies and disabilities

If necessary, our insurance will include children with any disability or allergy, but certain procedures must be strictly adhered to as set out below. For children suffering life threatening conditions, or requiring invasive treatments; written confirmation from our insurance provider must be obtained to extend the insurance.

At all times we ensure that the administration of medication is compliant with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage.

Oral medication:

Asthma inhalers are now regarded as 'oral medication' by insurers and so documents do not need to be forwarded to our insurance provider. Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them.

We must be provided with clear written instructions on how to administer such medication.

We adhere to all risk assessment procedures for the correct storage and administration of the medication.

We must have the parents or guardians prior written consent. This consent must be kept on file. It is not necessary to forward copy documents to our insurance provider.

Life-saving medication and invasive treatments:

These include adrenaline injections (Epipens) for anaphylactic shock reactions (caused by allergies to nuts, eggs etc) or invasive treatments such as rectal administration of Diazepam (for epilepsy).

We must have:

a letter from the child's GP/consultant stating the child's condition and what medication if any is to be administered;

written consent from the parent or guardian allowing [our staff/me] to administer medication; and

proof of training in the administration of such medication by the child's GP, a district nurse, children's nurse specialist or a community paediatric nurse.

Copies of all three documents relating to these children must first be sent to [the Pre-school Learning Alliance Insurance Department for appraisal (if you have another provider, please check their procedures with them)].

Written confirmation that the insurance has been extended will be issued by return.

Key person for special needs children requiring assistance with tubes to help them with everyday living e.g. breathing apparatus, to take nourishment, colostomy bags etc.:

Prior written consent must be obtained from the child's parent or guardian to give treatment and/or medication prescribed by the child's GP.

The key person must have the relevant medical training/experience, which may include receiving appropriate instructions from parents or guardians.

Copies of all letters relating to these children must first be sent to [the Pre-school Learning Alliance Insurance Department for appraisal (if you have another provider, please check their procedures with them)]. Written confirmation that the insurance has been extended will be issued by return.